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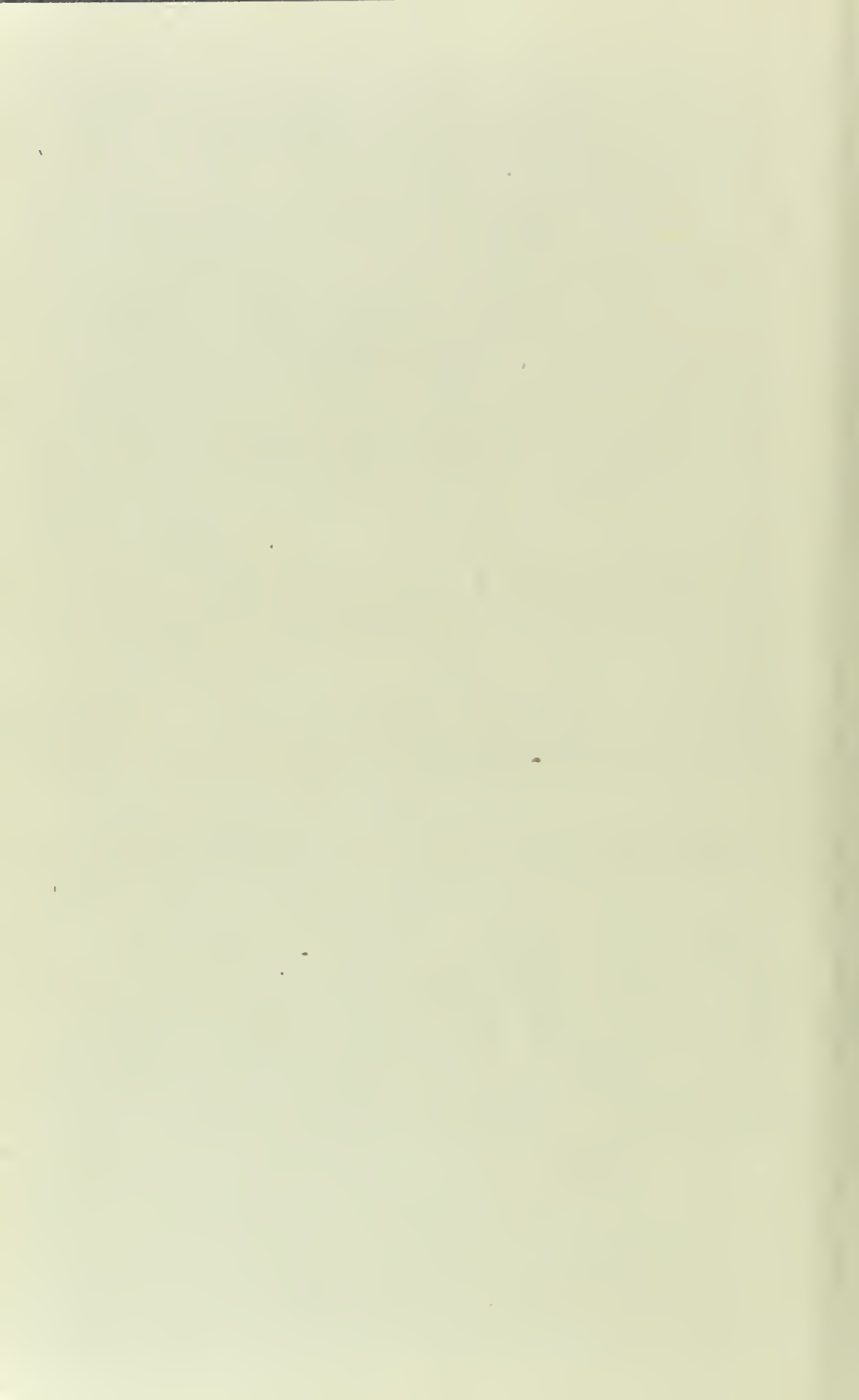
DALTON-IN-FURNESS
URBAN SANITARY DISTRICT

ANNUAL REPORT
OF THE
Medical Officer of Health

For the Year 1943.



DALTON-IN-FURNESS:
J. SINKINSON & SON, PRINTERS,
1944.



ANNUAL REPORT

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Medical Officer of Health.

DALTON-IN-FURNESS URBAN DISTRICT, 1943.

**To the Chairman and Members of the Dalton-in-Furness
Urban District Council.**

GENTLEMEN,

I have the honour to submit to you the Annual Report for the year 1943 on the sanitary circumstances, administration and vital statistics of your District. It is shorter than would have been the case in peace time to comply with the instructions of the Ministry of Health that Annual Reports should be curtailed during the period of the war.

GENERAL STATISTICS.

Area (acres) 8,026.

Number of inhabited houses 3,100.

Rateable Value £40,246.

Amount produced by a Penny Rate £159.

EXTRACTS FROM VITAL STATISTICS.

BIRTHS.—There were 177 births, 88 male and 89 female, giving a birth-rate of 16.5 per 1,000. Six of the total 177 births were of illegitimate children. There were, in addition, 11 still-births giving a still-birth rate of .56 per 1,000.

DEATHS.—During the year 1943, 149 deaths of residents were registered, giving a death rate of 13.9 per 1,000. Fifty seven of the deaths occurred in the first quarter of the year, 35 in the second; 28 in the third, and 29 in the fourth. The age periods at which the deaths occurred were:—

Under 1 year	1-	5-	10-	15-	20-	30-	40-	50-	60-	70-	80-	90-	Total
6	1	2	2	8	5	5	7	23	28	43	23	1	149

INFANTILE MORTALITY.—There were 6 deaths of infants under one year of age giving an infantile mortality rate of 33.9 per 1000 registered births, which compares favourably with the rate of 49 for England and Wales. Two of the infants died in the neo-natal period, i.e., before attaining the age of one month. There has been, in the country as a whole, relatively little decline in the death-rate during the neo-natal period, a fact which suggests that the causes of mortality in this period are different from the causes of mortality in the later months, and also that they are less amenable to those influences, which have led to so marked a reduction in the infantile death-rate as a whole. One of the Neo Natal deaths was due to Congenital Deformity, the other to Marasmus and premature birth.

The causes of death among those infants who died in the later months were:— (a) Toxæmia and Infantile Convulsions; (b) Acute Bronchitis and Congenital Weakness; (c) Pneumococcal Meningitis and Pneumonia; (d) Convulsions, Cerebral Hæmorrhage and Birth Injury.

MATERNAL MORTALITY.—There were two maternal deaths, one was ascribed to Central Placenta Prævia and the other to Pulmonary Embolism.

INFECTIOUS DISEASES.—Four deaths were ascribed to infectious diseases:—two to Measles and one to Whooping Cough, all three complicated by Bronchio-pneumonia. The fourth death, in a female of 71, was due to Encephalitis Lethargica.

OTHER CAUSES OF DEATH.

Heart Disease	...	...	31
Cerebral Thrombosis	...	...	14
Arteriosclerosis	...	...	5
Cancer	...	...	13
Influenza	...	...	12
Bronchitis	...	...	12
Pneumonia	...	...	5
Pulmonary Tuberculosis			7

Nephritis	...	...	8
Diabetes	...	...	3
Senility	...	...	6
Accident	...	...	9
Suicide	...	...	2
Other Causes	...	...	10
			—
			137
			—

CANCER.

Age Periods at which deaths occurred :

Organs Affected.	30-40		40-50		50-60		60-70		70-80		80-86		TOTAL
	M	F	M	F	M	F	M	F	M	F	M	F	
Bowel	1		—		1		1		1		—		4
Mediastinum	—		—		1		1		—		—		2
Abdominal Glands	—		—		1		—		—		—		1
Ventricles	—		—		1		1		—		—		2
Breast	—		—			1			—		—		1
Uterus	—			1	—				—		—		1
Larynx	—		—		—				1		—		1
Lungs	—		—		—		1		—		—		1
	1		1		3	2	4		2		—		13

Cancer was accountable for 8.8 per cent of all the deaths which occurred in Dalton Urban District during the year 1943. The corresponding figure for England and Wales in 1939 was 13.8.

INFECTIOUS DISEASES.

	1938	1939	1940	1941	1942	Number of Cases	Removed to Hospital	Deaths in Hospital
Scarlet Fever	13	2	1	1	1	9	9	—
Diphtheria	3	2	—	3	1	2	2	—
Typhoid and Para-Typhoid	1	—	—	—	—	—	—	—
Measles	—	—	88	26	2	210	1	—
Whooping Cough	—	3	33	6	—	34	—	—
Pneumonia	1	1	1	—	1	—	—	—
Encephalitis Lethargica	—	—	—	—	—	1	—	—
Poliomyelitis	—	—	—	—	—	—	—	—
Puerperal Pyrexia & Fever	—	—	—	2	—	—	—	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—
Erysipelas	1	3	1	2	1	1	—	—
Cerebro-Spinal Fever	—	—	1	—	1	1	1	—
TOTAL	19	11	125	40	7	258	13	NIL.

The most striking feature of the incidence of infectious disease during the year 1943 is the occurrence of a large number of cases of Measles. Outbreaks of this disease occur from time to time, and, unfortunately, nothing can be done to avert them. As the infection is generally spread during the early catarrhal stage of the illness (when the patient appears to have nothing more than a severe dose of cold) before the rash appears, and before a diagnosis has been made, prevention of the malady is rendered almost impossible by the usual methods of control. School closure is of little avail as a preventive measure on account of the many opportunities of acquiring infection outside of the school.

It is a mistake to assume, as many parents do, that Measles is a trivial complaint. Far from being trivial, it is the most fatal of all diseases in children under 5 years of age. The importance therefore, of doing everything possible to protect "toddlers" from Measles infection cannot be too strongly emphasised. The longer an attack of Measles can be postponed, the better the outlook for the child. Mortality in Measles is due, not so much to the disease itself, but to complications which may supervene, such as Broncho-Pneumonia, Bronchitis, Otitis Media, etc. A doctor should always be called as soon as Measles is suspected. The patient should be isolated from other children and kept warm in bed. Careful home-nursing throughout the illness is essential. The adoption of these simple precautions will go far, not only to save life, but also to ensure that the patient makes a satisfactory recovery and does not subsequently suffer from respiratory or other troubles which impair health and vigour and undermine the constitution of the child.

Two of the 210 patients who suffered from Measles died, the disease in each case being complicated by Broncho-pneumonia.

There were only two cases of Diphtheria, both girls of 5 years of age. The parents had neglected to avail themselves of the facilities provided by the Council for the immunisation of children against the Disease.

DIPHTHERIA IMMUNISATION.—During 1943 a total of 605 children completed the full course of immunisation, namely 262 under 5 years and 343 between the age of 5 and 15 years. At the end of the year it was estimated that 61.8 per cent of the child population under 5 years of age and 54.5 per cent of those between the ages of 5 and 15 had been protected against attack by Diphtheria by means of immunisation.

We are very much indebted to Head Teachers and members of their staffs and to the County Council School Nurses for their valuable assistance in achieving the results to which reference is made above.

LABORATORY FACILITIES.—The laboratory work of the District is now carried out at the Ministry of Health Emergency Pathological Service Laboratory which has been established at the High Carley Sanatorium. The Council are fortunate in being able to avail themselves of a first class service provided by a laboratory within easy reach. This not only enables specimens to reach the laboratory in a condition to ensure satisfactory investigation and reliable results, but facilitates consultation between the clinician and the laboratory expert which is often advantageous. In the skilled Pathologist to the Laboratory, Dr. Brundret, medical men practicing in the area have a very helpful colleague with whom they can confer on all cases of doubt or difficulty.

As your temporary Medical Officer of Health, I should like to express my appreciation of the valuable assistance which your Public Health Department has invariably received from Dr. Brundret.

TUBERCULOSIS. NEW CASES AND MORTALITY DURING 1943.

Age Periods Years		New Cases				Deaths			
		Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
		M	F	M	F	M	F	M	F
0	...	—	—	—	—	—	—	—	—
1	...	—	—	—	—	—	—	—	—
5	...	1	—	3	—	—	—	—	—
10	...	—	—	—	—	—	—	—	—
15	...	2	—	—	1	—	—	—	—
20	...	1	—	—	1	—	—	—	—
25	...	2	3	1	3	1	2	—	—
35	...	2	1	—	—	—	1	—	—
45	...	1	1	—	—	—	1	—	—
55	...	3	—	—	—	2	—	—	—
65 and upwards		—	—	—	—	—	—	—	—
TOTALS		12	5	4	5	3	4	0	0
		17		9		7		0	
		26				7			

WATER SUPPLY.

The circular of the Ministry of Health on Annual Reports of Medical Officers of Health for the year 1943 requires such reports to contain a statement as to the sufficiency and quality of the water supply of the area and its several parts etc.

The Urban District of Dalton is provided with water by the Barrow-in-Furness Corporation in mains belonging to the County Borough Council. Dalton is supplied from the Poaka Beck Reservoir and Askam from the Ulpha Intake of the River Duddon.

There was no shortage of water during the year 1943.

Samples taken by your Sanitary Inspector from water taps in Dalton on the 25th October and 1st November, 1943, and subjected to bacteriological examination at the Ministry of Health Emergency Pathological Service Laboratory at the High Carley Sanatorium, revealed the presence of coliform organisms in 100 c.c. On these results being brought to the notice of appropriate officers of the Barrow-in-Furness Corporation, the Water Engineer and Manager, Mr. Diamond, very kindly promised to look into the matter and to flush the mains supplying the taps from which the unsatisfactory samples had been taken. Another sample, taken on 19th November, proved to be quite satisfactory. The results are given below:—

REPORT.

Probable number of coliform organisms per 100 c.c.	0.
Plate Count after 2 days at 37° C. (colonies per lc.c.)	3.
Plate Count after 3 days at 22° C. (colonies per lc.c.)	48.

REMARKS.—A satisfactory sample.

(Signed) J. CARR BRUNDRET.

22nd November, 1943.

DAIRIES AND COWSHEDS.

There are some 47 cow-keepers in the District engaged in the production of milk for sale, two of whom are producers of Accredited Milk. There are, in addition, 3 retail purveyors. While at some of the farms conditions are satisfactory, or reasonably satisfactory, at many much is left to be desired. Many of

the shippons are old stone built structures and little appears to have been done, by re-construction or otherwise, to render them suitable for the production of milk. Some are defective in air-space, some in height (often with lofts above) some in lighting and ventilation and some in internal arrangement. Defective floors are all too common and drainage arrangements faulty. The practice sometimes met with of keeping manure in close proximity to the doors of the shippon may perhaps lessen the labour involved in removing dung from the cowshed, but is contrary to the most elementary principles of hygiene.

In some instances there is no separate dairy in which milk can be cooled and stored. In such circumstances the farmhouse kitchen, or scullery, is not infrequently used for the purpose in contravention of the requirements of the Milk and Dairies Order, 1926. It is, of course, difficult to remedy such defects in war-time owing to the scarcity of labour and materials, but it should be emphasised that, in the event of an inmate of the farm-house contracting a milk-borne infectious disease, the keeping of milk in the kitchen or scullery is a procedure fraught with danger to the health of the consumers of the milk.

In the circumstances which obtain at some of the farms it is not easy to attain, and maintain, a high standard of milk production. The position is aggravated by the black-out regulations, by the difficulty of obtaining labour and by the greater acreage which has to be brought under the plough as a war-time necessity. Notwithstanding these difficulties a majority of cowkeepers appear to endeavour to produce milk of as high a standard as circumstances permit.

SANITARY INSPECTORS LACK OF TRANSPORT FACILITIES.

In an area extending to 8,026 acres containing four widely separated townships and 47 farms producing milk for sale it is not possible for a Sanitary Inspector to carry out his duties adequately, or to his own satisfaction, unless the Council provide him with suitable means of transport. The bus service is totally inadequate for the purpose and does not reach many parts of the area at all. Mr. Johnstone has, upon occasion, had no alternative but to hire a taxi to enable him to undertake urgent work in outlying parts of the area. But this can, at best, be regarded as an unsatisfactory makeshift having regard to the

fact that a taxi is not always available when required and no reliance could be placed upon it to meet the needs of an emergency, such as an outbreak of infectious disease in the area, when the duties devolving on your Sanitary Inspector might require the constant use of a car from morning until night. In the interests of the health of the community for which I, as your temporary Medical Officer of Health, am responsible, I request the Council to give serious consideration to ways and means whereby your Sanitary Inspector may be provided with adequate means of transport to enable him to discharge the important duties of his office in a manner more satisfactory to himself and the Council, than is at present possible.

AMBULANCE FACILITIES.

In addition to the ambulance for infectious diseases maintained by the Ulverston Joint Hospital Board and garaged at the High Carley Isolation Hospital, the Health Committee of the Dalton Council own and operate an ambulance for accidents and non-infectious patients. There are reciprocal arrangements for help in case of need with the Ulverston Joint Ambulance Committee and with Barrow-in-Furness. The service appears adequate to meet the needs of the area.

SANITARY SUPERVISION, ETC.

The report of your Sanitary Inspector, Mr. A. Harvey Johnstone, is appended.

In conclusion, I should like to express my thanks to your Sanitary Inspector for the very able assistance he has invariably rendered, and to the Council for their much appreciated kindness and support.

I am, Gentlemen,

Your obedient servant,

HUGH A. MACEWEN.

Report of the Sanitary Inspector and Cleansing Superintendent.

To the Chairman and Members of the Dalton-in-Furness
Urban District Council.

Gentlemen,

I have the honour to present my first Annual Report on the Health and Sanitary conditions of the District during the year ending 31st December, 1943.

HOUSING STATISTICS.

1. *Inspection of Dwelling-houses during the year :—*

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	63
(b) Number of inspections made for the purpose	212
(2) (a) Number of dwelling-houses which were inspected and recorded under the Housing Consolidated Regulations, 1925	10
(b) Number of inspections made for the purpose	32
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	2
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for habitation	53

2. *Remedy of defects during the Year without service of formal notices :—*

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	43
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3. *Action under Statutory Powers during the Year :—*

A.—Proceedings under sections 9, 10 and 16 of the Housing Act, 1936 :

(1)	Number of dwelling-houses in respect of which informal statutory notices were served requiring repairs	...	...	...	2
(2)	Number of dwelling-houses which were rendered fit after service of formal notices	...			2
(a)	By Owners	...	...	...	1
(b)	By Local Authority in default of owners				1

B.—Proceedings under Public Health Acts :

(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...	..	...	53
(2)	Number of dwelling houses in which defects were remedied after service of formal notices					
(a)	By owners	...	...	...	...	14
(b)	By local authority in default of owners					14

4. *Housing Act, 1936.—Part IV.—Overcrowding:—*

(a)	(i)	Number of dwellings overcrowded at the end of the year	...	...	...	...	1
	(ii)	Number of families dwelling therein	...				1
	(iii)	Number of persons dwelling therein	...				7
(b)		Number of new cases of overcrowding reported during the year	...	...	...		1
(c)	(i)	Number of cases of overcrowding relieved during the year	....	....	....		1
	(ii)	Number of persons concerned in such cases	....			Adults 3 Children 6	9

REFUSE COLLECTION AND DISPOSAL.—This important phase of public health work, can be said to have improved with the addition of a new vehicle during the past year. There is yet, however, improvements which can and will be made in collection and disposal. On the whole the work has been carried out satisfactorily, despite a certain amount of difficulty in respect of labour.

PUBLIC CLEANSING, 1943.

Month	No. Ashpits Emptied	No. Loads Collected	Approx. Tonn.
Jan.	80	79	194
Feb.	35	68	136
March	63	98	196
April	82	112	224
May	59	111	222
June	87	102	204
July	71	107	214
Aug.	57	90	180
Sept.	84	97	194
Oct.	56	107	214
Nov.	72	100	200
Dec.	24	84	168
	770	1173	2346

In conclusion I thank the Chairman and members of the Health Committee for their kindness and support, also the Medical Officer for his unfailing courtesy and encouragement.

I have the honour to be

Your obedient servant,

A. H. JOHNSTONE.

